

		Application No.:	10/679,726 ✓
		Filing Date:	October 6, 2003
		First Named Inventor:	David Haase, et al
		Confirmation No.	2876
		Group Art Unit	2187
		Examiner:	Farrokh, Hashem
		Customer No.	24227
Total Number of Pages in this Submission:	17	Docket No.	EMC-03-100CIP2

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Authorization for the Commissioner to charge Deposit Account No. 05-0889 for fees associated with this transaction (in duplicate) <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Decl. <input type="checkbox"/> Extension of Time Request for ___ Months (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment <input type="checkbox"/> Recordation Cover Sheet <input type="checkbox"/> Declaration/Power of Attorney <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Revocation of Power of Attorney <input type="checkbox"/> Formal Drawings <input type="checkbox"/> Letter to Official Draftsperson with three (3) sheets of redlined changes to drawings <input type="checkbox"/> Copy of PTO 948, "Notice of Draftsperson's Patent Review" <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Additional Enclosures:	<input type="checkbox"/> Petition for Revival of an Unintentionally Abandoned Application [37 CFR 1.137(b)] (in duplicate) <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) <input type="checkbox"/> Form PTOL-85B, Part B -Issue Fee Payment Transmittal," (in duplicate) <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Certificate of First Class Mailing <input type="checkbox"/> Certificate of Express Mail Mailing <input checked="" type="checkbox"/> Postcard
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

7/13/06

Date: July 13, 2006

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Date: July 13, 2006

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Carl B. Tegtmeier
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A P P L I C A T I O N S

**FEE TRANSMITTAL
For FY 2006**

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
110.00

Complete if Known

Application Number	10/679,726
Filing Date	October 6, 2003
First Named Inventor	David Haase, et al
Examiner Name	Farrokh, Hashem
Art Unit	2187
Attorney Docket No.	EMC-03-100CIP2

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 05-0889 Deposit Account Name: EMC Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small EntityFee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)Multiple Dependent ClaimsFee (\$)Fee Paid (\$)

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x		=

4. OTHER FEE(S)

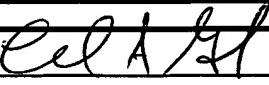
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer fee under 37 CFR 1.20(d)

Fees Paid (\$)

110.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 41,780	Telephone (914) 798 8505
Name (Print/Type)	Carl A. Giordano		Date July 13, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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